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Jane M Duffy
44 Southwood Rd
Newington CT 06111 NUV 18 2006

KADDEN, ARPS, SLATE,
MEAGHER & KLOM P

Kadden-Arps Slate Meagher & Krom

Sorry that the enclosed
documentation was not
submitted to support
my claim -

If any further information
is needed please advise -

Thank you

Jane Duffy

860-666-0103

Act # 0000837345

790000 Delphi Stree

**OFFICE OF THE UNITED STATES TRUSTEE FOR THE
SOUTHERN DISTRICT OF NEW YORK**
33 Whitehall Street, 21st Floor
New York, New York 10004
Tel. No. (212) 510-0500
Fax No. (212) 668-2255

AML

EQUITY SECURITY HOLDER COMMITTEE ACCEPTANCE FORM

Re: *In re Delphi Corporation, et. al* (the “Debtors”), Case No. 05-44481 (RDD)
(jointly administered) (the “Delphi Cases”)

**PLEASE RETURN THIS FORM TO THE OFFICE OF THE UNITED STATES TRUSTEE
BY FIRST CLASS MAIL OR FACSIMILE NO LATER THAN 12:00 NOON ON APRIL 24, 2006**

PLEASE TYPE OR PRINT NEATLY AND CLEARLY:

The undersigned equity security holder is willing to serve on a committee of equity security holders in the Delphi Cases:

() YES

(X) NO

- A. EQUITY SECURITY HOLDER'S NAME, ADDRESS, TELEPHONE NUMBER, FACSIMILE NUMBER AND EMAIL ADDRESS:**

Jane M. Claffey - 860-666-0103
44 Southwood Road Newington, Ct 06111

- B. NAME OF REPRESENTATIVE OF EQUITY SECURITY HOLDER, ADDRESS,
TELEPHONE AND FACSIMILE NUMBERS AND EMAIL ADDRESS, IF DIFFERENT:

- C. HOW MANY SHARES OF DELPHI STOCK DO YOU OWN? (Equity security holders wishing to serve as fiduciaries on any statutory committee are advised that they may not trade while they are committee members, except pursuant to a subsequent order of the Bankruptcy Court authorizing trading by committee members. By submitting this form, you agree to this prohibition.)

Act #0000 827345 - 79,000 Shares

- D WHAT DATE(S) DID YOU PURCHASE THE SHARES?

Spine 2B of 38 M 12/17/01

E. DID YOU BUY OR SELL ANY SHARES ON MARCH 21 OR 22, 2006?

() YES () NO

IF YES, HOW MANY SHARES DID YOU BUY OR SELL, AND WHAT WAS THE COST PER SHARE?

F. ARE YOU A PARTY TO ANY LITIGATION AGAINST THE DEBTORS?

() YES () NO

EXPLAIN: _____

G. IF YOU ARE AN OFFICER OR DIRECTOR OF ANY DEBTOR, INDICATE YOUR POSITION:

H. IF YOU ARE RELATED TO AN OFFICER OR DIRECTOR OF ANY DEBTOR, OR A PERSON IN CONTROL OF ANY DEBTOR, PLEASE INDICATE THE RELATIONSHIP:

I. DO YOU HAVE ANY OTHER TYPE OF CLAIM AGAINST THE DEBTORS, INCLUDING SECURED DEBT, BOND DEBT, OR ANY OTHER GENERAL UNSECURED CLAIM?

() YES () NO

IF YES, PLEASE INDICATE THE NATURE AND THE AMOUNT OF THE CLAIM:

DATE: 11-13-06

SIGNATURE: Jane M. Duffy

PRINT NAME AND TITLE: JANE M. DUFFY

- KINDLY ANSWER ALL QUESTIONS SO THAT THIS FORM MAY BE PROCESSED PROPERLY WITHOUT DELAY.
- PLEASE RETURN TO THE UNITED STATES TRUSTEE NO LATER THAN 12:00 NOON ON APRIL 24, 2006.
- THIS IS NOT A PROOF OF CLAIM FORM. PROOFS OF CLAIM ARE FILED WITH THE CLERK OF THE BANKRUPTCY COURT, NOT WITH THE UNITED STATES TRUSTEE.